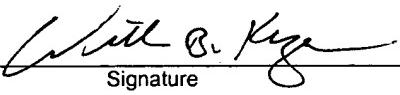


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 022361-000310US
FY 2005 (fees effective on or after October 1, 2004)		
Application Number 09/622,703	Filed August 21, 2000	
For METHOD FOR DETERMINING TRANSCRIPTION FACTOR ACTIVITY AND ITS TECHNICAL USES		
Art Unit 1634	Examiner Carla J. Myers	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55 \$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430	\$215 \$ 215 _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980	\$490 \$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1530	\$765 \$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2080	\$1040 \$ _____
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u> . I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the	<input type="checkbox"/> applicant/inventor.	
	<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).	
	<input type="checkbox"/> attorney or agent of record. Registration Number _____	
	<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>37,369</u> .	
 _____ Signature		11/09/04 _____ Date
William B. Kezer, Reg. No. 37,369 _____ Typed or printed name		925-472-5015 _____ Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of <u>1</u> form is submitted.		

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